MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)		SERIAL NO. 10599357		FILING DATE 092606	
		APPLICANT(S)			

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1	1	1				51							
2		1		1			52							
3		2		1			53							
4		①		1			54							
5		①	①	1			55							
6		①	①	1			56							
7		①		1			57							
8		①	①	1			58							
9		①		1			59							
10	1			1			60							
11		1		1			61							
12		2	—				62							
13							63							
14							64							
15							65							
16							66							
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43							93							
44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
TOTAL IND.	2	↓	1	↓		↓	TOTAL IND.			↓		↓		↓
TOTAL DEP.	12	←	10	←		←	TOTAL DEP.			←		←		←
TOTAL CLAIMS	14		11				TOTAL CLAIMS							

PTO - 1360 (REV. 11/04)

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